

*** Working Draft**
Washington State Board of Health
2001-2003 Priority Issues
As of August 31, 2001

Access to Critical Health Services, Phase II

Potential Board Sponsors: Tom Locke, Ed Gray

Staff: Don Sloma

The Board will circulate and promote its menu of critical health services, which furthers the access discussion by addressing the question: Access to what? New and continuing work might include: collaborating with local health jurisdictions to develop and use localized lists; exploring ways to incorporate the list into the development of an insurance product; and developing a list of performance measures for assessing access. The Board may convene forums on access around the state, possibly in conjunction with the Governor's Subcabinet on Health, and/or the Governor's Office of Policy HRSA grant. This work may be offered as the Board's contribution to the Public Health Improvement Partnership (see below).

Children's Health and Well-Being, Phase II

Potential Board Sponsors: Vickie Ybarra, Margaret Pageler, Charles Chu

Staff: Doreen Garcia

Having identified a list of clinical preventive services for children, the Children's Health & Well-Being Committee will explore ways to improve access to these services and to measure whether children are now receiving them. Foci for this continuing work might include exploring incentives, requirements, and services linkages that would increase access at school entry and/or during childcare. They might also include addressing specific indicators such as dental care and obesity and nutrition. The Committee expects to advance its work on vaccine policy—ensuring universal access to vaccines, promoting a registry, and increasing outreach and education. It will also continue its rule reviews—specifically visual and auditory screening, scoliosis screening, newborn screening, prenatal screening, with an eye toward aligning the requirements more close with the recommended list of clinical preventive services.

Health Disparities

Potential Board Sponsors: Joe Finkbonner, Vickie Ybarra, Margaret Pageler

Staff: Marianne Seifert

The Health Disparities Committee's ongoing work will include promoting its 2001 recommendations on workforce diversity and participating in workforce development efforts to promote consideration of diversity goals. The Board will also update its scan of the broader issue of health disparities and develop a new work plan. Possible areas of future focus include: additional efforts to improve workforce diversity; examining institutional racism and cultural competence; exploring ways to target specific diseases and indicators in particular populations (e.g., motor vehicle accidents among Native Americans) to achieve measurable improvements in health outcomes.

Dialogue on Genetics

Potential Board Sponsors: *Linda Lake, Tom Locke, Vickie Ybarra, Ed Gray*

Staff: *Don Sloma*

The Legislature asked the Board to convene a task force to explore the risks and benefits to public health and privacy posed by emerging genetic technologies. The group will report its findings by October 1, 2002.

Environmental Health

Potential Board Sponsors: *Carl Osaki, Joe Finkbonner*

Staff: *Marianne Seifert*

In addition to its ongoing review of rules, the Board expects to consider changes to the fee requirement for food worker cards, revise the on-site sewage rule, revise the water recreation rule, and revise elements of the drinking water rules related to group B systems. In addition, the Board will consider addressing local environmental health concerns identified through community assessments such as the *Protocol for Community Excellence in Environmental Health* (PACE-EH) and explore ways to improve local environment health improvement capacity by cooperating with local, state and federal efforts. The Board has reserved a portion of its staffing capacity in anticipation of emerging environmental health issues.

Public Health Improvement Partnership

Potential Board Sponsors: *Tom Locke, Neva Corkrum*

Staff: *Don Sloma*

The Board will continue to serve as a member of the PHIP. Members and staff will participate in committees and the Board will continue to lead in identifying gaps in access to critical health services.

2002 State Health Report

Staff: *Craig McLaughlin*

The Board is required to produce a state health report every two years. As part of its efforts to set priorities, the Board conducted several pieces of related research this past biennium—a survey of current studies about public and environmental health, interviews with key informants about health priorities, public hearings, and a review of ongoing projects by other public health organizations—and developed a report to the Board about its findings. The Board will produce a 2002 State Health Report that expands on and refines the information contained in that priorities report. (NOTE: This is likely to require modification as a result of evolving visions of the State Health Report, and in particular the notion of producing a strategic vision for the state in cooperation with the Governor's Subcabinet on Health.)